

**STATE OF TENNESSEE  
DEPARTMENT OF HEALTH**

**REQUEST FOR GRANT PROPOSALS**

**FOR**

**Ryan White Part B Care Services and HIV Prevention Services**

**RFGP Number: 34349-84417**

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*\* (If a grant is awarded to a governmental entity established pursuant to Tennessee Code Annotated (such as a human resource agency, a developmental district, the University of Tennessee, or a Board of Regents school), the standard terms and conditions of the grant shall be revised accordingly; however, significant performance requirements shall not be revised.)*

**REQUEST FOR GRANT PROPOSAL****STATE OF TENNESSEE****DEPARTMENT OF HEALTH****I. STATEMENT OF INTENT AND DESCRIPTION OF SERVICES REQUESTED:**

The Tennessee Department of Health hereinafter referred to as "State" or "Department" is soliciting grant proposals to serve as the Lead Agency for Ryan White Part B Human Immunodeficiency Virus (HIV) Care services and HIV Prevention Services. The selected Lead Agency will be responsible for coordinating technical assistance and the arrangement of statewide training and semi-annual meetings for contracted and sub-contracted agencies. Ryan White Part B and HIV Prevention funds will be funneled through the Lead Agency to be further dispersed to each of the four (4) regions of the state. Because the money that will fund this work originates from federal sources, the selected Lead Agency will have reporting responsibilities and obligations to the federal agencies, the Health Resources and Services Administration (HRSA) and the Centers for Disease Control and Prevention (CDC). The purpose of this Request for Grant Proposal (RFGP) is to define the State's minimum requirements and solicit grant proposals for the services described herein.

The State intends to enter into one (1) grant for a period of twelve (12) months with an expected effective period from January 1, 2017 to December 31, 2017 and a grant amount of Four Million Dollars (\$4,000,000). At the end of the grant year, the State reserves the right to renew the grant for another year. The State may renew the grant four (4) times, so that the total grant term is no longer than five (5) years.

**A. Detail Description of Services Requested:**

The Tennessee Department of Health uses federal funds from HRSA and the CDC to provide Ryan White Part B and HIV Prevention Services to Tennesseans living with, and who are at highest risk for contracting HIV. The Tennessee Department of Health's mission is to protect, promote, and foster sexual health through HIV/STD prevention, identification, treatment, and education among people in Tennessee. The Lead Agency will accomplish this mission through the three (3) distinct segments of the grant: (i) Ryan White Part B services, (ii) HIV Prevention services, and (iii) statewide technical assistance and training.

The Lead Agency must coordinate community planning groups which address issues of HIV care and prevention in each of the four regions: West, Middle, Southeast, and East Tennessee, as designated in Appendix A. Not included in Appendix A are the counties of Shelby, Tipton, and Fayette, which are independently served through a different process.

1. Ryan White Part B services will be administered, monitored, and reported on by the Lead Agency, as required by the grant. These will include, at a minimum, the following deliverables:
  - a. The grantee assists in planning for the development and delivery of services for individuals with HIV disease within each of the four (4) regions;
    - i. The grantee signs formal subcontracts with service providers as being recipients of local Ryan White funds (after approval of subcontractors has been received from the State).
    - ii. The grantee is responsible for receiving invoices from subcontractors
    - iii. The grantee is responsible for reimbursing subcontractors and for ensuring that auditable records are maintained for all payments.
    - iv. The grantee is responsible for ensuring that all subcontractors use CAREware Data system to collect service delivery data.
    - v. The grantee is responsible for monitoring all regional subcontractors and conducting monitoring site visits no less than two (2) times per year.
  - b. The grantee agrees to implement and provide activities related to the operation of the regional Councils, in accordance with the “Tennessee Consortia Development Training Manual of 2016” at the following link: [https://tn.gov/assets/entities/health/attachments/TN\\_ConsortiaDevelopmentAndTrainingManual.pdf](https://tn.gov/assets/entities/health/attachments/TN_ConsortiaDevelopmentAndTrainingManual.pdf) and the “Tennessee Part B Regional HIV CARE Consortia Program Guidance” which is updated annually at the following link: [https://tn.gov/assets/entities/health/attachments/RyanWhitePartB\\_ProgramAndApplicationGuidance.pdf](https://tn.gov/assets/entities/health/attachments/RyanWhitePartB_ProgramAndApplicationGuidance.pdf). The State will provide copies of these to the Grantee.
    - i. The grantee coordinates support services as recommended by the regional needs assessment, such as case management, food, transportation services, etc..
    - ii. The grantee is responsible for maintaining all regional council meeting files.
    - iii. The grantee is responsible for submitting to the State a formal budget based upon Ryan White Part B funds allocated statewide and within each region for care services. This budget should include funding categories (based upon prioritized needs defined

within the analysis of the needs assessment) and amounts intended to be awarded.

- c. The grantee coordinates technical assistance, training, and community resource identification for each region's integrated needs assessment/resource allocation, and each region's community partnership development by provision of the following:
  - i. Coordination of networking capabilities for each regional council with other community-based HIV services to facilitate development of a regional council Service Plan;
  - ii. Development of a community resource brochure for distribution to HIV/AIDS clients through each regional council; and
  - iii. Attendance of meetings, as requested by the State, regarding the regional councils, community-based services, or Housing and Urban Development (HUD) Consolidated Plan.
- d. The grantee serves as fiscal agent for the State's Ryan White Part B Oral Health/Dental Care Program, providing statewide dental program management in accordance with Ryan White Part B Oral Health/Dental Policy #6-10 to include the following services:
  - i. Maintenance of a provider list of licensed dentists who agree to provide dental services for eligible clients living within each region;
  - ii. Payment of bills for pre-approved dental services for eligible clients within thirty (30) days of receipt of the bill;
  - iii. Maintenance of auditable records of all payments made and a case file on all clients served; and
  - iv. Entering oral health/dental care service records into CAREware for later reporting on the annual Ryan White Services Report (RSR)
- e. The grantee prepares and submits Quarterly Reports to the State no later than the fifteenth (15<sup>th</sup>) day of the month following the end of each quarter of the grant period, and must address the Ryan White Part B program proposal and the cost effectiveness of delivering comprehensive care in each region, as per the "Tennessee Part B Regional HIV CARE Consortia Program Guidance."
- f. The grantee completes and submits to the State an initial Implementation Plan and a quarterly Implementation Plan. The initial Implementation Plan will list the services to be provided, the projected number of clients to be served, and the projected units of service to be provided (measured in 15

minute increments and dollars). The quarterly Implementation Plan will list the progress made toward the projections of the initial Implementation Plan. These reports are cumulative and are due to the State Consortia Coordinator or their designee no later than the fifteenth (15<sup>th</sup>) day of the month following the end of each quarter of the grant period.

- g. The grantee hosts and maintains a CAREware database (CAREware is the Health Resources and Service Administration [HRSA] database used by all Ryan White programs) and submits to the State a Quarterly Export Data File. The quarterly reports shall be submitted no later than the fifteenth (15<sup>th</sup>) day of the month following the end of each quarter of the grant year.
- h. The grantee gathers all the data elements required to complete the Ryan White Services Report (RSR). The RSR includes:
  - i. Grantee Report - collects information about the services the provider was funded to provide.
  - ii. Service Provider Report - captures services actually delivered on a contract-by-contract basis under Ryan White HIV/AIDS Program Part B;
  - iii. Client Report - captures the services received by each individual client.

The RSR for the previous calendar year shall be submitted annually to the State by the designated due date.

- i. The grantee gathers all data elements required to complete the Ryan White Women, Infants, Children and Youth (WICY) Report. All funded agencies are required to submit an annual report to the State regarding service provision and listing the amount of dollars expended on all eligible women (25 years old and older), infants (less than 2 years old), children (2 - 12 years old) and youth (13 – 24 years old).

The WICY Report for the previous grant period is due to Ryan White Services Program no later than June 15<sup>th</sup>.

- 2. HIV Prevention services will be administered, monitored, and reported on by the Lead Agency, as required by the grant. These will include, at a minimum, the following deliverables:
  - a. Ensure that the following HIV Prevention Services as defined by the CDC, are provided based on community need: HIV Counseling, Testing and Referral (CTR); and Effective Behavioral Intervention (EBI).

Information on these CDC approved HIV Prevention Services can be found at: <http://www.effectiveinterventions.org/en/Interventions.aspx>;

- b. Solicit Request for Proposals (RFPs) for direct client HIV Prevention Services that include HIV Counseling, Testing and Referral; EBI.
- c. Ensure that sub-recipient agencies follow State HIV testing procedures, protocols, and all applicable disease reporting statutes published by the TDH at: <http://tn.gov/health/topic/STD-professionals>;
- d. Provide sub-recipient agencies with monitoring, technical assistance, and training to ensure compliance of service staff training requirements, completion of service objectives, achievement of performance standards, and compliance with the TDH guidelines in the delivery and documentation of services;
- e. Make information available quarterly (by April 1st; July 1st; October 1st; and January 1st of each calendar year) on HIV Prevention training opportunities to all sub-recipient agencies which provide HIV counseling and testing services (oral fluid/rapid);
- f. Implement activities related to the operation of the regional councils. See Appendix B for more information about the regional councils. They will meet at least quarterly. The Lead Agency will provide meeting space, meeting announcements, and any technical assistance needed to conduct business meetings and committee meetings;
- g. Prepare and submit to TDH on a quarterly basis the minutes from the full council membership meetings in each region no later than thirty (30) days following the end of each quarter (May 1st, August 1st, November 1st, and February 1st of each calendar year); and as requested by TDH.
- h. Conduct meetings regarding regional councils and sub-recipient services, attended by one or more program coordinator, as requested by the Director of HIV Prevention Services;
- i. Provide fiscal and programmatic oversight to sub-recipient HIV Prevention agencies by reviewing, approving and processing for payment sub-recipients' requests for reimbursement to ensure that funds are utilized exclusively for legal and appropriate grant activities and that no funds are expended for promotional items;

- j. Conduct semi-annual site visits with each HIV Prevention sub-recipient to monitor fiscal expenditures and documentation;
  - k. Perform an annual programmatic site visit with each HIV Prevention sub-recipient to monitor programmatic progress as outlined in the funded sub-recipient agency's scope of services written in its grant proposal;
  - l. Communicate any programmatic or fiscal findings via email to the State HIV Prevention Director within seven (7) business days of the visit;
  - m. Provide a written corrective action plan to any HIV Prevention sub-recipient with either a fiscal or a programmatic finding and a copy to the State, within twenty-one (21) business days of the visit. The State's recipient of the copy of the corrective action plan is the Director of HIV Prevention.
  - n. Seek reimbursement on a monthly basis from the State using forms approved by the State.
  - o. Submit within forty-five (45) days (from January 1<sup>st</sup> to February 15<sup>th</sup>) from the Grant Contract end date (December 31, 2017), a final grant expenditure report along with any unclaimed advance funds.
  - p. Collect quarterly reports from sub-recipients and submit them to the State HIV Prevention Program Evaluation Coordinator within two (2) weeks following the end of each quarter (April 15<sup>th</sup>; July 15<sup>th</sup>; October 15<sup>th</sup>, and January 15<sup>th</sup> of each calendar year) during the term of the contract.
3. The Lead Agency will provide statewide technical assistance as required by the Ryan White Part B and HIV Prevention programs at TDH. These will include, at a minimum, the following deliverables:
- a. Perform an annual technical assistance/training needs assessment for regional Councils and funded sub-recipient agencies by June 30th of each calendar year.
  - b. Develop training modules and coordinate training sessions for contracted and sub-recipient agencies as indicated.
  - c. Coordinate and provide technical assistance for quality improvement monitoring to sub-recipient in each region.

- d. Conduct meetings regarding regional Councils and sub-recipient services, attended by one or more program coordinators as requested by the Director of HIV Prevention Services.
  - e. Arrange semi-annual statewide and TCPG meetings for grantee and sub-recipient agencies and community partners, as indicated.
4. Listed next are requisites for organizations who propose to become the Lead Agency:
- a. Must be willing to sign a formal contract with the State of Tennessee as the Lead Agency for the four (4) indicated regions of the state (West, Middle, Southeast, and East), and as such, will adhere to the regulations and requirements of the contract.
  - b. Must be able to demonstrate experience with generally accepted accounting principles, as evidenced by audit reports, appropriate records and financial management-information systems.
  - c. Must demonstrate organizational and programmatic capacity (or ability to build capacity) in order to meet grant requirements.
  - d. Must demonstrate how it will provide services locally within each of the four (4) regions and maintain the autonomy of each regional council, regardless of the geographic location of the Lead Agency's office.

## II. GENERAL INSTRUCTIONS AND REQUIREMENTS:

This Request for Grant Proposal (RFGP) is issued by the State of Tennessee, Department of Health. The Competitive Procurement Coordinator shall be the sole point of contact for purposes of information concerning this RFGP. All correspondence **must** be sent to:

Melissa Painter  
Competitive Procurement Coordinator  
Office of Contracts Review  
Division of Administrative Services  
Andrew Johnson Tower, 5<sup>th</sup> Floor  
710 James Robertson Parkway  
Nashville, TN 37243  
Phone: (615) 741-0285  
Fax: (615) 741-3840  
Email: [Melissa.Painter@tn.gov](mailto:Melissa.Painter@tn.gov)

### A. Schedule of Events:

The following is an anticipated timetable for the procurement process. The State reserves the right to adjust the schedule as it deems necessary.

<b>EVENT</b>	<b>TIME (central time zone)</b>	<b>DATE (all dates are state business days)</b>
1. RFGP Issued		June 29, 2016
2. Disability Accommodation Request Deadline		July 5, 2016
3. Pre-Proposal Teleconference	1:00 p.m.	July 11, 2016
4. Notice of Intent to Propose Deadline	2:00 p.m.	July 12, 2016
5. Written "Questions & Comments" Deadline	2:00 p.m.	July 15, 2016
6. State Response to Written "Questions & Comments"		July 20, 2016
7. Proposal Deadline	2:00 p.m.	July 27, 2016
8. State Completion of Grant Proposal Evaluations		August 1, 2016
9. Evaluation Notice Released	2:00 p.m.	August 4, 2016
10. Contractor Contract Signature Deadline		August 16, 2016
11. Effective Start Date of Contract		January 1, 2017

**Pre-Proposal Teleconference:**

A Pre-Proposal Teleconference will be held at the time and date detailed in the Schedule of Events.

Any proposer desiring to submit a proposal as a prime grantee contractor in response to this RFGP is encouraged to have at least one (1) representative at the teleconference, however attendance is not mandatory. The conference telephone number is **(888) 757-2790** and the participant passcode is **766173**. The presentation will also be available via adobe connect at the following link:

Web link: <http://stateoftennessee.adobeconnect.com/procurement/>

The purpose of the pre-proposal teleconference is to discuss the RFGP scope of services. The State will entertain questions, however potential proposers must understand the State's response to any question at the Pre-Proposal Conference shall be tentative and non-binding. Potential proposers should submit questions concerning the RFGP in writing pursuant to Section II, Part C.

Potential proposers with a disability may receive accommodation relating to the communication of this RFGP and participating in the RFGP process. Potential proposers may contact the Competitive Procurement Coordinator shown in Section II to request such reasonable accommodation no later than the Disability Accommodation Request Deadline detailed in the RFGP Section II, Part A Schedule of Events.

**B. Notice of Intent to Propose:**

Before the Notice of Intent to Propose Deadline detailed in the RFGP Section II, Part A, Schedule of Events, potential proposers should submit to the Competitive Procurement Coordinator a Notice of Intent to Propose (in the form of a simple e-mail or other written communication). Such notice should include the following information:

- the business or individual's name (as appropriate)
- a contact person's name and title
- the contact person's mailing address, telephone number, facsimile number, and e-mail address

A Notice of Intent to Propose creates no obligation and is not a prerequisite for making a proposal, however, it is necessary to ensure receipt of any RFGP amendments or other notices and communications relating to this RFGP.

**C. Questions and Answers:**

Questions concerning the RFGP must be presented to the Competitive Procurement Coordinator shown in Section II in writing, on or before the Deadline for Written Questions and Comments as detailed in Section II, Part A Schedule of Events. Each question should specify the RFGP sections to which questions pertain. Questions should be emailed, mailed or hand-carried to the Competitive Procurement Coordinator at the address shown in Section II of this RFGP.

The State's written responses to written questions will be considered official. Written responses will be emailed to potential proposers as indicated in Section II, Part B and on the date indicated in Section II, Part A Schedule of Events. Responses will also be available at the following website <http://health.state.tn.us/vendors.htm>. The responses will be included in the RFGP thereby as an amendment.

**D. Submission of Proposals:**

The proposer must submit a proposal by online submission via the following link no later than the deadline specified in Section II, Part A Schedule of Events in the form and detail specified in this RFGP. Please contact the Competitive Procurement Coordinator at the address as specified in Section II with any issues or concerns with online submission.

Web Link: <http://tn.gov/health/article/funding-opportunities>

It is the sole responsibility of the proposer to ensure that its proposal is delivered at the date and time specified in this RFGP in Section II, Part A Schedule of Events. A late proposal will not be accepted for review and evaluation by the State.

The proposal filing deadline is important. If proposals are submitted late, they are deemed to be late. The clock-in time will be determined by the time of the online submission. No other clock or watch will have any bearing on the time of proposal submission. Proposers are advised to avoid waiting until the last minute to submit proposals.

**Each Proposer shall assume the risk of the method of dispatching any communication or proposal to the State. The State assumes no responsibility for delays or delivery failures resulting from the method of dispatch.**

E. Proposal Amendment and Rules for Withdrawal:

A proposal may be withdrawn prior to the proposal due date by submitting a written request for its withdrawal to the State, signed by the proposer and mailed to the Competitive Procurement Coordinator shown in Section II.

The State shall not accept any amendments, revisions, or alterations to proposals after the proposal due date, unless formally requested in writing by the State prior to that time.

Any submitted proposal shall remain a valid proposal for six (6) months after the proposal due date.

F. Acceptance of Proposals:

All proposals properly submitted shall be accepted for evaluation. However, the State reserves the right to request clarifications or corrections to proposals, reject any or all proposals received, cancel, or withdraw this RFGP, according to the best interests of the State.

Requests for clarifications or corrections by the State may be in writing or may be oral. Requests for clarifications or corrections by the State shall not allow the proposer to alter its technical proposal or price contained in the grant budget, if any. Proposers' responses to State requests for clarifications or corrections shall be in writing and signed by an individual authorized to commit the proposer. Written responses to the State shall be received by the Competitive Procurement Coordinator shown in Section II pursuant to time frames set forth in the State's request for clarification of corrections.

The State reserves the right to waive variances in proposals providing such action is in the best interest of the State.

Where the State may waive variances, such waiver shall not modify other RFGP requirements or excuse the proposer from full compliance with the remainder of RFGP specifications and other grant requirements if the proposer is awarded a grant.

**G. Right to Further Negotiate:**

The Department can, at its sole discretion, further clarify or negotiate with the best evaluated proposer(s) subsequent to Notice of Intent to Award.

**H. Assignment and Subcontracting:**

The proposer must clearly identify in the proposal any intended subcontracts, the scope of work to be subcontracted, and the name(s) of potential subcontractor(s). All subcontracts must be approved by the State. The proposer (prime grantee), however, will be responsible for all work performed.

**I. Incurring Costs:**

All costs incurred by the proposer in preparing its proposal shall be borne by the proposer.

**J. Disclosure of Proposal Contents:**

All proposals and other materials submitted in response to this RFGP become the property of the State of Tennessee. Selection or rejection of a proposal does not affect this right. All proposal information, including detailed budget information, shall be held in confidence during the evaluation process. Only upon the completion of the evaluation of proposals, indicated by public release of a Notice of Intent to Award, shall the proposals and associated materials be open for review. By submitting a proposal, the Proposer acknowledges and accepts that the full contents of the proposal and associated documents shall become open to public inspection.

**III. PROPOSER ASSURANCES AND REQUIREMENTS:**

All proposers must submit the Letter of Transmittal for the Request for Grant Proposal, which is signed by an individual legally authorized to bind the proposer regarding compliance with the assurances and submission requirements. If a proposer fails to submit a Letter of Transmittal or to comply with any of the requirements contained in the Letter of Transmittal, the State may consider the proposal to be non-responsive and reject the proposal.

#### IV. PROPOSAL FORMAT AND CONTENT:

Your proposal shall address at least Sections IV.A, B, and C as follows. These sections shall be evaluated by the State and awarded points based upon the appropriateness, completeness and quality of the proposal. The following format should be used for the Lead Agent for Ryan White Part B Care Services and HIV Prevention Services and Statewide Technical Assistance:

Proposer must provide a detailed description of organizational capacity and experience, program scope and approach to service delivery, and program evaluation process to describe how they will achieve the requirements of the grant. Proposer must address each segment of the project separately for the relevant section of your proposal. There will be one (1) grant award for the four (4) regions of the State.

A. Organizational Capacity: Organization, Experience and Staff:  
**(15 TOTAL POINTS)**

This section shall contain pertinent information relating to your organization, staffing and experience that would substantiate your credentials to perform the services requested by the State. The following information should be included, at a minimum:

Describe your organization's experience as it relates to this proposal

1. Describe your organization's demonstrated capacity with similar projects and populations. If your organization is requesting "continuation" of previously funded activities, these should be described and indicators of program success should be included.
2. If your organization is, or has been, in a contractual relationship with the State of Tennessee, please provide the following information:
  - State agency name
  - Time period of the contract
  - Services provided
  - Name of main contact at state agency
3. Describe staff qualifications for the proposal. Include job descriptions, resumes, staffing pattern and other resources for implementing the project.

B. Technical Proposal for Scope of Services:  
**(70 TOTAL POINTS)**

This section should describe your plans and approach for providing the services requested. The information should be in sufficient detail to enable the State to ascertain your understanding of the services to be accomplished. The following information must be included, at a minimum:

1. Project Description/Understanding (**10 SUB-POINTS**)

You must provide a comprehensive narrative captioned, “Project Description/Understanding” that illustrates your organization’s understanding of the State’s requirements. The section must include the following information:

- Describe the target population and the geographic areas to be served.
- Describe the minimum numbers to be served, and an estimate of other persons to be impacted by your proposal.
- Describe how the program will focus on and meet the identified needs of the target population.
- Describe any gaps in services to be addressed by the project.
- Describe when, where and how often services will be delivered.

2. **Project Approach (45 SUB-POINTS)**

You must provide a comprehensive narrative captioned “Project Approach” that illustrates how your organization will provide the scope of services and meet the state’s services needs. The section must include the following information:

- Describe the overall services and specific activities to be provided by the project.
- Describe how the target population will be identified, recruited and retained.
- Describe innovative approaches to provision of services. Explain the benefits of those approaches and how they will maintain local autonomy and the voices of consumers and providers in each region of the state
- Describe partnerships and involvement with other community agencies for the project.
- Describe the use of volunteers, if any.
- Describe any special program issues such as confidentiality, client safety, transportation, etc.

3. **Project Management and Evaluation (15 SUB-POINTS)**

The “Project Management and Evaluation” section must provide a description of the goals and objectives to be established to measure the project’s success, as well as how your organization will determine it has accomplished its goals in terms of impact upon project participants. The “Project Management and Evaluation” section must include the following:

- Identify the goals and objectives for the project to establish how the project will impact the target population.
- Identify the performance indicators to be used to measure the project’s success.
- Identify the data sources to be used to capture both benchmark and periodic outcome measures.
- Identify any potential barriers to the project’s success and describe how your agency will address each anticipated barrier.

C. Grant Budget:  
**(15 TOTAL POINTS)**

This section shall contain all information relating to cost, based on a line item budget. Complete the Grant Budget form, and attached line item details found in the Sample Grant Contract as attachment 2. A position description should be provided with the expected qualifications for each position listed on the attached Salaries Detail. Indicate the percentage (%) of time a person's salary is to be charged to the proposed contract. A description of how dollars will be used must be provided for each line item completed.

Note: Please use the Department of Finance and Administration – Policy 03 Schedule A, (please refer to pages 11-16) for your use in determining which expense category an item should be listed in your grant budget. This policy can be found on the internet at the address listed below:

<http://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>

## **V. PROPOSAL EVALUATION:**

An evaluation committee made up of at least three (3) representatives of the Department of Health will be established to judge the merit of eligible proposals.

- A. Any proposal that is incomplete or contains significant inconsistencies or inaccuracies shall be rejected. The State reserves the right to waive minor variances or reject any or all proposals. The State reserves the right to request clarifications from all proposers.
- B. The committee shall analyze proposals on the basis of factors pertinent to the services requested in this RFGP. The specifications within this RFGP represent the minimum performance necessary for response.
- C. The Competitive Procurement Coordinator shown in Section II will meet with the evaluation committee to summarize and record their point awards on the proposal.
- D. Once total scores are finalized, the Competitive Procurement Coordinator shown in Section II will recommend to the Commissioner of the Department of Health the best evaluated proposal(s). Once approved by the Commissioner of the Department of Health, the Competitive Procurement Coordinator will send out the Notice of Intent to Award.

## **VI. GENERAL PROPOSER INFORMATION REGARDING GRANT CONTRACT:**

- A. Sample Grant Contract:

A Sample Grant Contract delineates the scope of services and/or options for the scope of services which the State expects the Grantee to provide (see Section A. of Sample Grant Contract). Additionally, the Sample Grant Contract includes the terms and conditions considered standard by the State. Do not complete the blanks in the Sample Grant Contract; the State will complete the blanks upon award of the Grant Contract.

- B. Additional Services:

If a proposer indicates that services shall be provided beyond those described in the Sample Grant Contract, these additional services should be listed in the proposal and, if accepted by the State, will be included in the grant document.

C. Proposer Exceptions to the Sample Grant Contract and/or RFGP:

If a proposer has an exception or objects to any of the terms and conditions listed in the Sample Grant Contract, the exception(s) must be listed in the proposal. Similarly, if a proposer is unable to provide any information requested in the RFGP for evaluation, that information is to be listed along with an explanation as to why the proposer cannot comply with the RFGP. Exceptions may result in disqualification of the proposer's proposal.

**Appendix A**

Regional Community Care and Prevention Planning Council Regions

Counties by Region

<b>West Tennessee</b>	<b>Middle Tennessee</b>	<b>Southeast Tennessee</b>	<b>East Tennessee</b>
Benton County	Bedford County	Bledsoe County	Anderson County
Carroll County	Cannon County	Bradley County	Blount County
Chester County	Cheatham County	Grundy County	Campbell County
Crockett County	Clay County	Hamilton County	Carter County
Decatur County	Coffee County	McMinn County	Claiborne County
Dyer County	Cumberland County	Meigs County	Cocke County
Gibson County	Davidson County	Polk County	Grainger County
Hardin County	DeKalb County	Rhea County	Greene County
Haywood County	Dickson County	Sequatchie County	Hamblen County
Henderson County	Fentress County		Hancock County
Henry County	Giles County		Hawkins County
Lake County	Hickman County		Jefferson County
Lauderdale County	Houston County		Johnson County
Madison County	Humphreys County		Knox County
Obion County	Jackson County		Morgan County
Weakley County	Lewis County		Roane County
	Lincoln County		Scott County
	Macon County		Sevier County
	Marshall County		Sullivan County
	Maury County		Unicoi County
	Montgomery County		Union County
	Moore County		Washington County
	Overton County		
	Perry County		
	Pickett County		
	Putnam County		
	Robertson County		
	Rutherford County		
	Smith County		
	Stewart County		
	Sumner County		
	Trousdale County		
	Van Buren County		
	Warren County		
	White County		
	Williamson County		
	Wilson County		

## Appendix B

### Regional Community Care and Prevention Planning Councils (RCCPPC)

For the purposes of this RFGP, Tennessee utilizes four (4) regional Councils that conduct community planning and other activities to ensure that needs are being identified and met from the grassroots level to the statewide level. The four (4) regional Councils are: West, Middle, Southeast, and East.

**The regional Councils** perform integrated HIV prevention and care planning. As outlined by HRSA and CDC, this includes comprehensive needs assessment, information and data sharing, cross representation on prevention and care planning bodies, coordinated/combined projects, combined meetings, merged planning bodies, and joint strategic decision-making on responses to a state's HIV epidemic. Under HIV Prevention, they track unmet needs within at-risk populations, and target populations with recommended interventions and activities in the *Tennessee Comprehensive HIV Prevention Plan* for each region. The Ryan White Part B Consortia are responsible for planning, resource allocation and contracting, program and fiscal monitoring, reporting, and service delivery under the auspices of the Lead Agency.

Regional Council representation consists of community members (including populations and subpopulation reflecting the local incidence of HIV), health department employees, community based organization representatives, and Lead Agency sub-grantees from within the region. Regional Councils are required to meet at least quarterly, but some regions have chosen to meet monthly or bimonthly. The regional Councils serve as a networking and capacity building unit for the Tennessee Department of Health.